

## SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective April 1, 2010

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto	46,822	+0.3%
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other		
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

na

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

We wish to expand the classes of business for which we offer Liquor Liability. In addition, coverage will be provided under a facultative agreement and we are contractually obligated to use our reinsurer's rating structure.

\* Adjusted to reflect all prior rate changes.

\*\* Change in Company's premium level which will result from application of new rates.

**RECEIVED**

JAN 15 2010

STATE OF ILLINOIS  
DEPARTMENT OF INSURANCE  
SPRINGFIELD, ILLINOIS

All America Insurance Company  
Name of Company

Mrs. Petrise Meyer  
Sr Rates and Forms Analyst  
Official - Title

H29219D

**Section 754.EXHIBIT A Summary Sheet (Form RF-3)**

FORM (RF-3)

**SUMMARY SHEET**

Change in Company's premium or rate level produced by rate revision  
effective May 1, 2010.

	(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+or-) **
1.	Automobile Liability Private Passenger		
	Commercial		
2.	Automobile Physical Damag Private Passenger		
	Commercial		
3.	Liability Other Than Auto	46,822	+1.3%
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Life of Insurance		

Does filing only apply to certain territory (territories) or certain  
Classes? If so,  
specify: \_\_\_\_\_

Brief description of filing. (If filing follows rates of an advisory  
Organization, specify  
organization):

Adopting ISO's 04/2010 ISO's loss costs and revising company  
multipliers effective May 1, 2010.

\*Adjusted to reflect all prior rate changes.

\*\*Change in Company's premium level which will result from application of new  
rates.

All America Insurance Company

Name of Company

Mrs. Louise Wittler, Rates & Forms Specialist

Official – Title

# ILLINOIS DEPARTMENT OF INSURANCE

## SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 4/1/2010

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto	320,248	-8.9%
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other		
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify: \_\_\_\_\_

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): \_\_\_\_\_

Implementing Insurance Services Office GL-2009-BGL1 (State Loss Costs).

\*Adjusted to reflect all prior rate changes.

\*\*Change in Company's premium level which will result from application of new rates.

American Casualty Company

Name of Company

Robert Anderson, Actuarial Consulting Director

Official - Title

**Section 754.EXHIBIT A Summary Sheet (Form RF-3)**

FORM (RF-3)

**SUMMARY SHEET**

Change in Company's premium or rate level produced by rate revision  
effective 4-1-2010.

	(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+or-) **
1.	Automobile Liability Private Passenger		
	Commercial		
2.	Automobile Physical Damag Private Passenger		
	Commercial		
3.	Liability Other Than Auto	\$212,012	-5.3%
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Life of Insurance		

Does filing only apply to certain territory (territories) or certain  
Classes? If so,  
specify: NO

Brief description of filing. (If filing follows rates of an advisory  
Organization, specify  
organization): ISO, Inc. Loss Cost Revision adoption with company LCM/ELR changes.

Information from company Page 14.

\*Adjusted to reflect all prior rate changes.

\*\*Change in Company's premium level which will result from application of new  
rates.

Amerisure Insurance Company

Name of Company

Karin M. Tremain - Senior Analyst & Compliance Consultant

Official - Title

**Section 754.EXHIBIT A Summary Sheet (Form RF-3)**

FORM (RF-3)

**SUMMARY SHEET**

Change in Company's premium or rate level produced by rate revision  
effective 4-1-2010.

	(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+or-) **
1.	Automobile Liability Private Passenger		
	Commercial		
2.	Automobile Physical Damag Private Passenger		
	Commercial		
3.	Liability Other Than Auto	\$1,091,848	-4.1%
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Life of Insurance		

Does filing only apply to certain territory (territories) or certain  
Classes? If so,  
specify: NO

Brief description of filing. (If filing follows rates of an advisory  
Organization, specify  
organization):

ISO, Inc. Loss Cost Revision adoption with company LCM/ELR changes.

Information from company Page 14.

\*Adjusted to reflect all prior rate changes.

\*\*Change in Company's premium level which will result from application of new  
rates.

Amerisure Mutual Insurance Company

Name of Company

Karin M. Tremain - Senior Analyst & Compliance Consultant

Official - Title

## SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective April 1, 2010

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto	348,376	+0.3%
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other		
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

na

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

We wish to expand the classes of business for which we offer Liquor Liability. In addition, coverage will be provided under a facultative agreement and we are contractually obligated to use our reinsurer's rating structure.

\* Adjusted to reflect all prior rate changes.

\*\* Change in Company's premium level which will result from application of new rates.

**RECEIVED**

JAN 15 2010

STATE OF ILLINOIS  
DEPARTMENT OF INSURANCE  
SPRINGFIELD, ILLINOISCentral Mutual Insurance Company  
Name of CompanyMrs. Petrise Meyer  
Sr Rates and Forms Analyst  
Official - Title

H29219D

**Section 754.EXHIBIT A Summary Sheet (Form RF-3)**

FORM (RF-3)

**SUMMARY SHEET**

Change in Company's premium or rate level produced by rate revision  
effective May 1, 2010.

	(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+or-) **
1.	Automobile Liability Private Passenger		
	Commercial		
2.	Automobile Physical Damag Private Passenger		
	Commercial		
3.	Liability Other Than Auto	348,376	+1.3%
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Life of Insurance		

Does filing only apply to certain territory (territories) or certain  
Classes? If so,  
specify: \_\_\_\_\_

Brief description of filing. (If filing follows rates of an advisory  
Organization, specify  
organization):

Adopting ISO's 04/2010 ISO's loss costs and revising company  
multipliers effective May 1, 2010.

\*Adjusted to reflect all prior rate changes.

\*\*Change in Company's premium level which will result from application of new  
rates.

Central Mutual Insurance Company

Name of Company

Mrs. Louise Wittler, Rates & Forms Specialist

Official – Title

# ILLINOIS DEPARTMENT OF INSURANCE

## SUMMARY SHEET

 Change in Company's premium or rate level produced by rate revision effective 4/1/2010

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto	1,026,366	-3.4%
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other		
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Implementing Insurance Services Office GL-2009-BGL1 (State Loss Costs).

\*Adjusted to reflect all prior rate changes.

\*\*Change in Company's premium level which will result from application of new rates.

Continental Casualty Company

Name of Company

Robert Anderson, Actuarial Consulting Director

Official – Title



# ILLINOIS DEPARTMENT OF INSURANCE

## SUMMARY SHEET

 Change in Company's premium or rate level produced by rate revision effective 4/1/2010

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto	1,460,219	-7.0%
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other		
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Implementing Insurance Services Office GL-2009-BGL1 (State Loss Costs).

\*Adjusted to reflect all prior rate changes.

\*\*Change in Company's premium level which will result from application of new rates.

Continental Insurance Company

Name of Company

Robert Anderson, Actuarial Consulting Director

Official – Title

**Section 754.EXHIBIT A Summary Sheet (Form RF-3)**

FORM (RF-3)

**SUMMARY SHEET**

Change in Company's premium or rate level produced by rate revision  
effective 04/01/2010.

(1) Coverage		(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+or-) **
1.	Automobile Liability Private Passenger		
	Commercial		
2.	Automobile Physical Damag Private Passenger		
	Commercial		
3.	Liability Other Than Auto	\$1,648,440	+5.9%
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
Life of Insurance			

Does filing only apply to certain territory (territories) or certain  
Classes? If so,  
specify:

All classes, all territories (including Fire/EMS-Pak Program)

Brief description of filing. (If filing follows rates of an advisory  
Organization, specify  
organization):

Adopt ISO Illinois Loss Cost revisions and increased limit

factor revisions; revise Company loss cost multipliers

\*Adjusted to reflect all prior rate changes.

\*\*Change in Company's premium level which will result from application of new  
rates.

Continental Western Insurance Company

Name of Company

Teresa Wineland - Sr. Research/Statistical Analyst

Official - Title

# ILLINOIS DEPARTMENT OF INSURANCE

## SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 0%

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto	450,000	0%
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other		
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify: No

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):  
Introduction of new coverages for the management liability insureds

\*Adjusted to reflect all prior rate changes.

\*\*Change in Company's premium level which will result from application of new rates.

Darwin National Assurance Company

Name of Company

Mark A. Smith Chief Claims Officer

Official - Title

ILLINOIS DEPARTMENT OF INSURANCE  
SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective

06/01/10

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto	1,696,900	-0.6%
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other		
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify:  
No

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

BCL Rate Revision

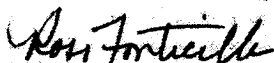
Commercial umbrella

\*Adjusted to reflect all prior rate changes.

\*\*Change in Company's premium level which will result from application of new rates.

Erie Insurance Exchange

Name of Company

Ross C. Fonticella, ACAS, MAAA  
Vice President and Manager

# ILLINOIS DEPARTMENT OF INSURANCE

## SUMMARY SHEET

 Change in Company's premium or rate level produced by rate revision effective 6/1/2010

(1)	(2)	(3)
<u>Coverage</u>	<u>Annual Premium Volume (Illinois)*</u>	<u>Percent Change (+ or -)**</u>
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto	1,100,325	21.60%
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other		
Line of Insurance		

 Does filing only apply to certain territory (territories) or certain classes? If so, specify: No

 Brief description of filing. (If filing follows rates of an advisory organization, specify organization): We are filing to adopt  
current ISO loss costs and increased limitis factors and we are revising our existing deviations from ISO

\*Adjusted to reflect all prior rate changes.

\*\*Change in Company's premium level which will result from application of new rates.

FCCI Insurance Company

Name of Company

Sherry E. Smith, Sr. Regulatory Compliance Specialist

Official - Title

**Section 754.EXHIBIT A Summary Sheet (Form RF-3)**

FORM (RF-3)

**SUMMARY SHEET**

Change in Company's premium or rate level produced by rate revision  
effective 04-01-10.

	(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+or-) **
1.	Automobile Liability Private Passenger		
	Commercial		
2.	Automobile Physical Damag Private Passenger		
	Commercial		
3.	Liability Other Than Auto	\$15,727	-4% (- \$ 629)
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Life of Insurance		

Does filing only apply to certain territory (territories) or certain  
Classes? If so,  
specify: No

Brief description of filing. (If filing follows rates of an advisory  
Organization, specify  
organization): ISO GL LC adoption

\*Adjusted to reflect all prior rate changes.

\*\*Change in Company's premium level which will result from application of new  
rates.

Gateway Insurance Company

Name of Company

Laura Ellsworth - Compliance Specialist

Official - Title

SUMMARY SHEET

Change in Company's premium or rate level produced by rate  
revision effective 1/11/2010.

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto	3,662,907	0.3%
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other		
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes?  
If so, specify: GL class 99310

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): We are filing to add a Products/Completed Operations rate to the new Snow Removal (99310) class.  
The proposed rate is \$15.00 with a payroll basis, to take effect on January 11, 2010.

\* Adjusted to reflect all prior rate changes.

\*\* Change in Company's premium level which will result from application of new rates.

Grinnell Mutual Reinsurance Company  
Name of Company

Eric Skouson - Assistant Actuary  
Official - Title

## SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 9/1/2010

	(1)	(2)	(3)
	<u>Coverage</u>	<u>Annual Premium Volume (Illinois)*</u>	<u>Percent Change (+ or -)**</u>
1.	Automobile Liability		
	Private Passenger		
	Commercial		
2.	Automobile Physical Damage		
	Private Passenger		
	Commercial		
3.	Liability Other Than Auto	\$266,243	+0.5%
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Adoption of ISO Loss Cost Revision GL-2009-BGL1

\* Adjusted to reflect all prior rate changes.

\*\* Change in Company's premium level which will result from application of new rates.

Markel American Insurance  
Company

Name of Company

Deidre I. Balbuena,  
VP Product & Regulatory Services

Official - Title



## SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 9/1/10

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto	\$1,365,264	+0.5%
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other		
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

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Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Adoption of ISO Loss Cost Revision GL-2009-BGL1

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\* Adjusted to reflect all prior rate changes.

\*\* Change in Company's premium level which will result from application of new rates.

Markel Insurance Company

Name of Company

Deidre I. Balbuena,  
VP Product & Regulatory Services

Official - Title

# ILLINOIS DEPARTMENT OF INSURANCE

## SUMMARY SHEET

 Change in Company's premium or rate level produced by rate revision effective 6/1/2010

(1)	(2)	(3)
<u>Coverage</u>	<u>Annual Premium Volume (Illinois)*</u>	<u>Percent Change (+ or -)**</u>
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto	163,997	16.9%
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other		
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

No

 Brief description of filing. (If filing follows rates of an advisory organization, specify organization): We are filing to adopt  
current ISO loss costs and increased limitis factors and we are revising our existing deviations from ISO

\*Adjusted to reflect all prior rate changes.

\*\*Change in Company's premium level which will result from application of new rates.

Monroe Guaranty Insurance Company

Name of Company

Sherry E. Smith, Sr. Regulatory Compliance Specialist

Official – Title

**Section 754.EXHIBIT A Summary Sheet (Form RF-3)**

FORM (RF-3)

**SUMMARY SHEET**

Change in Company's premium or rate level produced by rate revision  
effective 05/01/2010.

	(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+or-) **
1.	Automobile Liability Private Passenger		
	Commercial		
2.	Automobile Physical Damag Private Passenger		
	Commercial		
3.	Liability Other Than Auto	72,935 estimated	-4.0 estimated
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Life of Insurance		

Does filing only apply to certain territory (territories) or certain  
Classes? If so,  
specify: N/A

Brief description of filing. (If filing follows rates of an advisory  
Organization, specify  
organization):

Adoption of ISO revised commercial general liability loss  
costs contained in reference filing number GL-2009-BGL1.

\*Adjusted to reflect all prior rate changes.

\*\*Change in Company's premium level which will result from application of new  
rates.

National American Insurance Company

Name of Company

Jennifer Carr, Rate and Form Analyst

Official – Title

# ILLINOIS DEPARTMENT OF INSURANCE

## SUMMARY SHEET

 Change in Company's premium or rate level produced by rate revision effective 4/1/2010

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto	6,458,480	-7.1%
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other		
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify: \_\_\_\_\_

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): \_\_\_\_\_

Implementing Insurance Services Office GL-2009-BGL1 (State Loss Costs).

\*Adjusted to reflect all prior rate changes.

\*\*Change in Company's premium level which will result from application of new rates.

National Fire Insurance Company

Name of Company

Robert Anderson, Actuarial Consulting Director

Official – Title

# ILLINOIS DEPARTMENT OF INSURANCE

## SUMMARY SHEET

 Change in Company's premium or rate level produced by rate revision effective 6/1/2010

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto	1,743,750	22.2%
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other		
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

No

 Brief description of filing. (If filing follows rates of an advisory organization, specify organization): We are filing to adopt  
current ISO loss costs and increased limitis factors and we are revising our existing deviations from ISO

\*Adjusted to reflect all prior rate changes.

\*\*Change in Company's premium level which will result from application of new rates.

National Trust Insurance Company

Name of Company

Sherry E. Smith, Sr. Regulatory Compliance Specialist

Official – Title

**Section 754.EXHIBIT A Summary Sheet (Form RF-3)**

FORM (RF-3)

**SUMMARY SHEET**

Change in Company's premium or rate level produced by rate revision  
effective 2-15-10 New & 4-15-10 Renewal.

	(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+or-) **
1.	Automobile Liability Private Passenger		
	Commercial		
2.	Automobile Physical Damag		
	Private Passenger		
	Commercial		
3.	Liability Other Than Auto	\$22,714,300	+4.9%
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Life of Insurance		

Does filing only apply to certain territory (territories) or certain  
Classes? If so,  
specify: No

Brief description of filing. (If filing follows rates of an advisory  
Organization, specify  
organization): ISO Increased Limits Factor Revision

\*Adjusted to reflect all prior rate changes.

\*\*Change in Company's premium level which will result from application of new  
rates.

PEKIN INSURANCE COMPANY

Name of Company

Edward A. Mulvey, Vice President of Underwriting

Official - Title

**Section 754 EXHIBIT A Summary Sheet (Form RF-3)****FORM (RF-3)****SUMMARY SHEET**

Change in Company's premium or rate level produced by rate revision  
effective 02/01/2010.

(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+or-) **
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto	\$ 1,010,430	14.6%
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other _____		

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STATE OF ILLINOIS  
DEPARTMENT OF INSURANCE  
SPRINGFIELD

Does filing only apply to certain territory (territories) or certain  
Classes? If so,  
specify: No

Brief description of filing. (If filing follows rates of an advisory

Organization, specify

organization) Professionals Direct is filing for an overall rate change of +14.6%. This includes base rate, increased limit factor and firm size factor changes. See attached actuarial memo.

\* Adjusted to reflect all prior rate changes.

\*\*Change in Company's premium level which will result from application of new rates.

Professionals Direct Insurance Company

Name of Company

Melissa Glavin-Guillotte Compliance and Regulatory Analyst

Offical - Title

## SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 06/01/2010

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto	10,070,888	1.4%
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other		
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

No.

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Please see explanatory memo. *Changing LCM's*

\* Adjusted to reflect all prior rate changes.

\*\* Change in Company's premium level which will result from application of new rates.

Selective Insurance Company of  
South Carolina (SICSC)

Name of Company

LIBIN GUO – Actuarial Analyst  
Official - Title



Change in Company's premium or rate level produced by rate revision effective 06/01/2010

	(1)	(2)	(3)
	Coverage	Annual Premium Volume (Illinois)*	Percent Change (+ or -)**
1.	Automobile Liability		
	Private Passenger		
	Commercial		
2.	Automobile Physical Damage		
	Private Passenger		
	Commercial		
3.	Liability Other Than Auto	1,174,497	8.5%
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

No.

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Please see explanatory memo.

*Changing LCM's*

\* Adjusted to reflect all prior rate changes.

\*\* Change in Company's premium level which will result from application of new rates.

Selective Insurance Company of  
the Southeast (SICSE)

Name of Company

LIBIN GUO – Actuarial Analyst  
Official - Title

# ILLINOIS DEPARTMENT OF INSURANCE

## SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 4/1/2010

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto	1,221,200	-4.00%
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other		
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify: No, we are adopting Loss Costs  
for all General Liability territories. This applies to Riverport Insurance Company.

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): We are adopting  
the ISO General Liability Loss Cost revision GL-2009-BGL1 effective April 1, 2010. Our percentage of change number is based on  
the overall impact of the ISO rate level change.

\*Adjusted to reflect all prior rate changes.

\*\*Change in Company's premium level which will result from application of new rates.

Riverport Insurance Company

Name of Company

Terri Zachman, Product Development Analyst

Official – Title

SUMMARY SHEET

Change in Company's premium or rate level produced by rate  
revision effective 02/15/2010.

(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto	\$5,694,550	-0.4%
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other		
Line of Insurance		

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STATE OF ILLINOIS  
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SPRINGFIELD

Does filing only apply to certain territory (territories) or certain classes?  
If so, specify: Biotech classes for Public Companies in Directors & Officers

Liability

Brief description of filing. (If filing follows rates of an advisory  
organization, specify organization): This filing is being made for a slight  
revision in our rates and includes a clean-up of our rule pages.

\* Adjusted to reflect all prior rate changes.

\*\* Change in Company's premium level which will  
result from application of new rates.

RSUI Indemnity Company  
Name of Company

Ron Hardeman-VP, Regulatory Compliance  
Official - Title

# ILLINOIS DEPARTMENT OF INSURANCE

## SUMMARY SHEET

 Change in Company's premium or rate level produced by rate revision effective 4/1/2010

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto	253,272	-3.9%
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other		
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify: \_\_\_\_\_

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): \_\_\_\_\_

Implementing Insurance Services Office GL-2009-BGL1 (State Loss Costs).

\*Adjusted to reflect all prior rate changes.

\*\*Change in Company's premium level which will result from application of new rates.

Transportation Insurance Company

Name of Company

Robert Anderson, Actuarial Consulting Director

Official – Title

# ILLINOIS DEPARTMENT OF INSURANCE

## SUMMARY SHEET

 Change in Company's premium or rate level produced by rate revision effective 4/1/2010

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto	2,592,504	-5.8%
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other		
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify: \_\_\_\_\_

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): \_\_\_\_\_

Implementing Insurance Services Office GL-2009-BGL1 (State Loss Costs).

\*Adjusted to reflect all prior rate changes.

\*\*Change in Company's premium level which will result from application of new rates.

Valley Forge Insurance Company

Name of Company

Robert Anderson, Actuarial Consulting Director

Official – Title

Form ( RF-3 )  
**ILLINOIS DEPARTMENT OF INSURANCE**  
**SUMMARY SHEET**

Change in company's premium or rate level produced by rate revision effective

9/1/2010

( 1 ) <u>Coverage</u>	( 2 ) <u>Annual Premium Volume ( Illinois )*</u>	( 3 ) <u>Percent Change ( + or - )</u>
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto	\$288,887	9.0%
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other		
Line of Insurance		

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STATE OF ILLINOIS  
DEPARTMENT OF INSURANCE  
SPRINGFIELD

Does filing only apply to certain territory ( territories ) or certain classes? If so, specify :

No

Brief description of filing . ( If filing follows rates of an advisory organization, specify organization ):

Increase in Base Rates by 9.0% for the Professional Advantage for Lawyers program.

\*Adjusted to reflect all prior rate changes.

\*\*Change in Company's premium level which will result from application of new rates.

Westport Insurance Corporation

Name of company

Patrick Cobb, Regulatory & Actuarial Services L

Official-Title